



Best Practice Initiative

from the Assistant Secretary for Health
U.S. Department of Health and Human Services



Communicare

Columbia, SC

Statewide Volunteer Network of Care Providers

Accomplishments

- 50,462 prescriptions valued at over \$7.72 million were filled at no charge to patients in one year
- Over 2,390 uninsured children in three Communicare operated clinics received dental care in the last three years
- 10,500 new patients received free primary care and prescription medications in one year
- Saved over \$3 million in cost of emergency room visits and revisits via reduced utilization
- Coordinated eight pharmaceutical companies who donated over 140 medications through the Communicare central fill pharmacy primarily to treat chronic illnesses

Introduction

To address the growing problem of access to health care for uninsured populations, Communicare was launched in 1993 to provide care for people in South Carolina who do not qualify for Medicare or Medicaid but who fall below national poverty guidelines and cannot afford health insurance. Communicare's founders envisioned creating a single source through which health care providers and pharmaceutical companies could donate their resources. This network would make the most of donations by coordinating them, and patients in need of free care would have a single place to turn for help. Today that delivery system brings together more than 2,000 volunteer doctors, dentists, nurse practitioners and pharmacists, along with hospitals, clinics and labs to provide nearly every type of health care, free to Communicare's registered patients.

As for doctors who were already treating low-income patients, Communicare has become a resource for getting free medication to those patients. Communicare reduces utilization by uninsured patients of emergency departments, a place where many would otherwise end up. For patients with nowhere to turn, Communicare provides quality health care through its network of volunteers and line of pharmaceuticals. Pharmaceutical manufacturers contribute to Communicare's success by providing medications, and making it possible for patients to receive prescriptions through a closed centralized pharmacy. The pharmaceutical component makes Communicare unique. No other program in the country offers this level of prescription support. For Communicare's patients, it may mean not having to choose between buying groceries and getting the medications they need.

To qualify for Communicare, a family must live at or below 145% of the national federal poverty guidelines. This is defined as an annual income of \$26,680 or less for a family of four. There are about 600,000 adults living in South Carolina who are uninsured or underinsured. Many of these people have hourly wage jobs with no employer-provided health insurance. Some are

employed as farm workers, waitresses, shrimpers and many combine a number of part-time jobs in order to make a living. Many are single parents whose children have Medicaid coverage. Often, as with so many other family expenses, children's needs come first and health care for these parents is a cost they can't afford. Yet, when they fail to get the care they need, many of these people are no longer able to work effectively and find their jobs in jeopardy.

Meanwhile, South Carolina is plagued with the same health care problems that affect the poorest populations. South Carolina ranks near the top compared to other states in diabetes and high blood pressure. Both conditions require constant monitoring and treatment. Both conditions lead to serious complications if left untreated. Those who cannot afford regular care often end up in hospital emergency departments. The majority of Communicare patients have identified the emergency room as their primary place for care. Not only is this the most costly form of care for these patients, it is also not the best solution for the patient's continuity of care needs. Emergency departments are designed to treat acute conditions. Patients with chronic conditions need a different kind of care, best provided by a different kind of provider. Typically, a primary care provider or other general practitioner meets this need.

Since 1993, Communicare has filled a gap in health care coverage by collaborating effectively with pharmaceutical firms, local hospitals, doctors, pharmacists, labs and other providers who donate all, or part, of their services to persons in need. To date, more than \$10 million in health care services has been generated. More importantly, Communicare helps to keep thousands of uninsured patients healthier and better able to work, in association with an improved quality of life.

Goals and Objectives

Communicare strives to help patients maintain and improve their health. Through regular doctor's visits and improved medication adherence, patients actively participate in preventive care. For many of them, this is a new experience. Seeing a physician is one aspect of Communicare, and free prescriptions is another equally important aspect. Without Communicare, uninsured patients often cannot afford to get the medication they need. Pharmacists report that these patients often "self-medicate," taking less of the medication than prescribed at irregular intervals. Since Communicare's creation, thousands of patients have received no-cost medications worth millions of dollars. A large percentage of these pharmaceuticals are used to manage diabetes and high blood pressure.

Reducing the dependence on emergency departments through a free clinic partnership has been another goal of the Communicare program. In 2002-03, over 4500 free clinic patients were enrolled in Communicare through hospital/clinic outreach efforts. These patients have been re-directed to primary care doctors within these clinics. These patients also received about \$3.6 million in prescription medications through Communicare.

Communicare is able to meet its goals and objectives because of the network that it has created. Public-private partnerships have been the most critical to the network's success. The program does not build clinics, but instead relies on health care providers who volunteer to treat patients in their own offices. Partnerships with the state medical association and the pharmacy association have been vital to forming the framework of health care providers that Communicare relies on to care for its patients. Hospital partnerships are also becoming ever more important. As hospitals recognize the

value of using Communicare to reduce emergency department costs, they are also devoting staff time and resources to assisting patients to enroll in Communicare, and hospital emergency room staffs have become important team members for reaching out to patients.

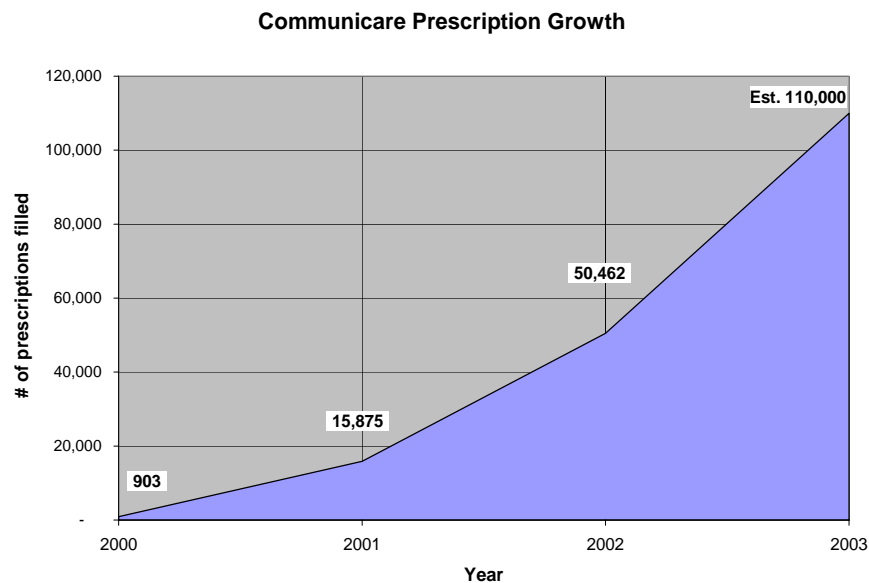
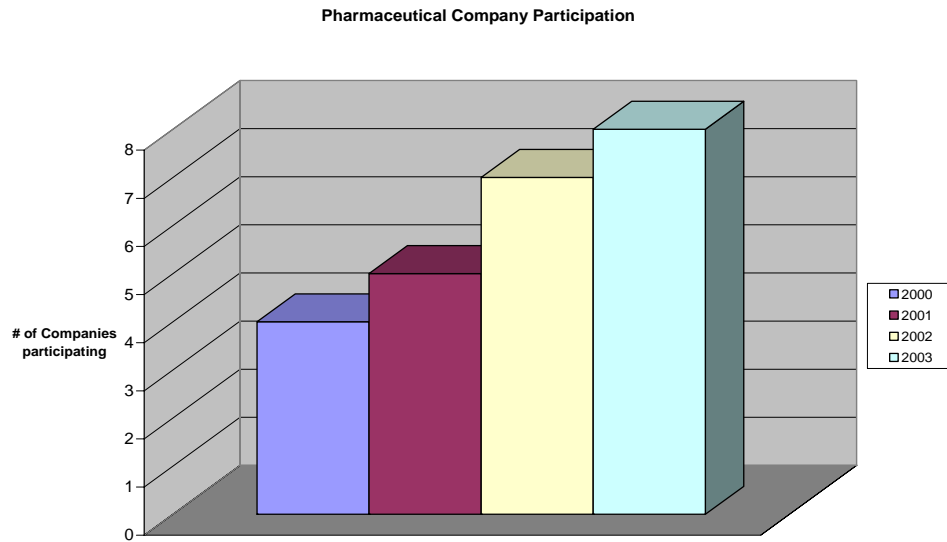
Model

Patients begin the Communicare process by calling a toll free number. After screening the patient by phone, Communicare mails an application, and after the application is returned, the patient is processed to determine financial eligibility. Every applicant must provide proof of household income, and every applicant is expected to have some means since those receiving government aid alone do not qualify for Communicare. Applications are typically approved within five business days. Patients are urged to proactively enroll in the program before experiencing a medical problem. Once approved, patients are referred to volunteer providers to make their own appointments. Eight pharmaceutical companies donate bulk medications to the Communicare central fill pharmacy. When the physician writes a prescription from the Communicare formulary, it is faxed to the Communicare central fill pharmacy and is filled by the pharmacy staff. The medication is then mailed out that day via UPS to a specified clinic, physician's office or pharmacy.

Patients are eligible for Communicare for one year and may reapply at the end of that year. While physicians agree to see a patient one time at no charge, future visits with the same physician may be arranged at no or low cost to the patient. Communicare staff work with patients to arrange additional care as needed. Communicare enrolls patients through the toll free number, and on site at several South Carolina hospitals.

Results

Communicare volunteer providers see, on average, over 10,000 patients each year. Fifty-two percent of these patients need treatment for diabetes and/or high blood pressure. Through its toll free number, Communicare has become a single source for many patients to find the help they need. Many patients who call Communicare say that they did not know where to turn or have been confused by other programs. In 18 months, Communicare has processed more than 84,000 calls on its toll free patient line. In addition, Communicare has helped patients connect with other service programs that can supplement Communicare, such as job service, family counseling, and financial planning programs.



Conclusions and Future

Communicare is a primary care, private, non-profit organization that began in 1993 when a group of physicians and state leaders took action to bridge a gap in health care delivery. The working poor numbered nearly 600,000 adults in South Carolina, a group that was uninsured and unable to afford regular health care. Built on the premise of “sharing the burden,” Communicare initially created a network of physicians who were willing to see patients at no charge in their own offices, maximizing the use of existing resources. Communicare also sought to fill the need for affordable medications for these patients. Soon, pharmaceutical access became the single most important aspect of the program.

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